MAINE PUBLIC HEALTH ALERT NETWORK SYSTEM



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Update

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TO: York and Cumberland County Hospitals; Infection Control Practitioners; School

Nurses; Public Health-Required

FROM: Dora Anne Mills, M.D., M.P.H., Public Health Director

SUBJECT: Update: Hepatitis A in the Kennebunk Area

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Hepatitis A in Kennebunk Area

In mid to late September 2008 a cluster of six cases of hepatitis A was reported in a family in the Kennebunk area. Two of the children in the family attended Consolidated School in Kennebunkport. Since late October four additional cases of illness have been identified. Two of these cases were in members of the extended family diagnosed in September. The other two cases were in students at Consolidated School; these two students were unrelated to the extended family with hepatitis A. The average incubation period of hepatitis A is 30 days with a range from 15 to 50 days. Given the time interval since the initial family cluster, these newly identified cases most likely represent a second generation of infection. With the two new ill students, it is likely that transmission occurred in the school setting.

At the recommendation of the Maine CDC, a vaccination clinic was held at Consolidated School on November 6. Approximately 82% of the students and staff were immunized. The hepatitis A vaccine is a two-dose series although one dose of vaccine has been shown to provide a high level of protection. The second dose of vaccine will be offered at the school during a clinic on May 15, 2009. The hepatitis A vaccine was recommended for all children one year of age in the United States beginning in 2006. Most children attending school have not previously been vaccinated against hepatitis A since this recommendation was not in place when they were infants.

Recommendations from the Maine CDC for vaccination have focused on groups considered at highest risk of infection: close contacts of persons with hepatitis A such as family members and the students and staff of Consolidated School. The Maine CDC has not recommended vaccination for other groups at this time. Health care providers are encouraged to consider hepatitis A infection in persons with recent onset of jaundice, fever, anorexia, fatigue, nausea, dark urine, clay colored stools, and abdominal discomfort. Diagnostic testing should include hepatitis A IgM antibody and liver enzymes (AST/ALT).

Hepatitis A is an uncommon disease in Maine. An average of 11 cases are identified in Maine each year. All cases of suspected viral hepatitis should be reported immediately by phone to the Maine CDC. Epidemiologists are available to provide guidance on post-exposure prophylaxis with either hepatitis A vaccine or immune globulin. To be effective, post exposure prophylaxis needs to be given as soon as possible, but not later than 14 days after last exposure.

Hepatitis A can result in mild illness in children; many will be asymptomatic. In adults, hepatitis A infection can range in severity from mild to life threatening. Case fatality can reach 1.8% in adults over 50 years of age. Individuals are considered infectious during the latter half of the incubation period and for approximately 1 week after onset of jaundice. The virus is excreted in feces and is transmitted by the fecal-oral route. Good hand washing is key to limiting disease transmission.

For More Information: Contact Maine CDC at 1-800-821-5821. Recommendations for hepatitis A post-exposure prophylaxis are available at: http://www.cdc.gov/mmwr/PDF/wk/mm5641.pdf.